



Wisconsin Department of Agriculture,  
Trade and Consumer Protection  
2811 Agriculture Drive, P.O. Box 8911  
Madison, WI 53708-8911  
(608) 224-4998 or (608) 224-4968

## MILK CONTRACTOR DEFAULT CLAIM WAIVER

(authorized under s. 126.70, Wis. Stats.)

STATE OF \_\_\_\_\_ )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )

I, \_\_\_\_\_, being first duly sworn on  
(Print Name)  
oath state that:

1. I am a (producer)(producer agent)(authorized representative of a producer/producer agent)(circle one that applies) located at:

\_\_\_\_\_  
(Producer/Producer Agent mailing address)

2. I do certify to the department that I, or the principal I represent, have a greater than 50 percent ownership interest, or collectively with other persons, have a greater than 50 percent ownership interest, in

\_\_\_\_\_  
(Name of Producer/Producer Agent)

3. I do certify to the department that said producer/producer agent has a greater than 50 percent ownership interest, or collectively with other persons have a greater than 50 percent ownership interest, in

\_\_\_\_\_  
(Name of Milk Contractor)

4. Attached to and made part of this waiver are copies of true and accurate documents showing the ownership interests in the producer/producer agent and in the milk contractor, and documentation to show that I am authorized to sign this waiver on behalf of the producer/producer agent, all as required in §126.70(1)(c), Wis. Stats.

5. The producer/producer agent does hereby permanently waive the right to file a default claim under § 126.70 (1), Wis. Stats., against said milk contractor.

6. As a producer/producer agent/authorized representative of a producer/producer agent, I submit this waiver, as notification of the ownership interest of at least 50 percent in said producer/producer agent and said milk contractor, and acknowledge that, based on this permanent waiver, milk delivered to said milk contractor is, and will not be, included in said milk contractor's total milk payroll contractor obligations for determination of filing annual financial statements required to be filed with the department under s. 126.44 (1), Wisconsin Statutes, and determination of assessment payments into the Wisconsin agricultural producer security fund established under s. 25.463, Wisconsin Statutes, and that payment for milk delivered by producer/producer agent to said milk contractor will have no right to recovery of claims under Chapter 126, Subchapter VII, Wisconsin Statutes.

7. This waiver is to certify facts under which milk is delivered by producer/producer agent to the above named milk contractor and producer/producer agent acknowledges that deliveries of milk from producer/producer agent to said milk contractor cannot participate in the agricultural producer security fund under Chapter 126, Subchapter V, Wisconsin Statutes, or in recovery of claims under Subchapter VII Wisconsin Statutes.

8. The producer/producer agent has authorized the person signing this default claim waiver to execute this waiver. All statements contained in this waiver are true, correct and accurate. The producer/producer agent and the authorized person signing this waiver fully understand that if any statement contained in this waiver is not true, correct or accurate, or is false or misleading, the milk contractor and the authorized person signing this waiver may be in violation of s. 126.50, Wis. Stats., and subject to the provisions of Subchapter VIII of Chapter 126, Wis. Stats.

\_\_\_\_\_  
(Signature of Authorized Person)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_  
(City/State)

Signed and sworn to (or affirmed) before me on \_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Notary Public)

\_\_\_\_\_  
(Print Name of Notary)

[SEAL] Notary Public, State of \_\_\_\_\_

My commission (is permanent) (expires): \_\_\_\_\_